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FORM 3 For An Authorized Committee Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. Friends of Schumer 192 Lexington Avenue ADDRESS (number and street) Suite 1001 Check if different than previously 10016 New York reported. (ACĆ) FEC IDENTIFICATION NUMBER ▼ CITY ZIP CODE STATE STATE ▼ DISTRICT 3. IS THIS NEW **AMENDED** C00346312 **OR** REPORT (N) (A) TYPE OF REPORT (Choose One) (b) 12-Day PRE-Election Report for the: (a) Quarterly Reports: Primary (12P) General (12G) Runoff (12R) April 15 Quarterly Report (Q1) Convention (12C) Special (12S) July 15 Quarterly Report (Q2) in the October 15 Quarterly Report (Q3) Election on State of January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: Special (30S) General (30G) Runoff (30R) Termination Report (TER) in the Election on State of 2012 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Steven Goldenkranz Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office